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ABSTRACT

The handbook describes the Project FIND Zero-Reject Model for identifying and serving handicapped children in Texas's Gregory-Portland Independent School District. A Flow Chart of the system is provided, and the following components are discussed (sample subtopics in parentheses): needs assessment, staffing patterns (responsibilities of directors, counselors, and instructional supervisors), staff training (screening and working with parents), public awareness (media, interagency cooperation, and medical contacts), integration (referrals, related therapy services, and transportation), and management (sample home contact records, total service plans for individual education programs, and public awareness management forms). (CL)

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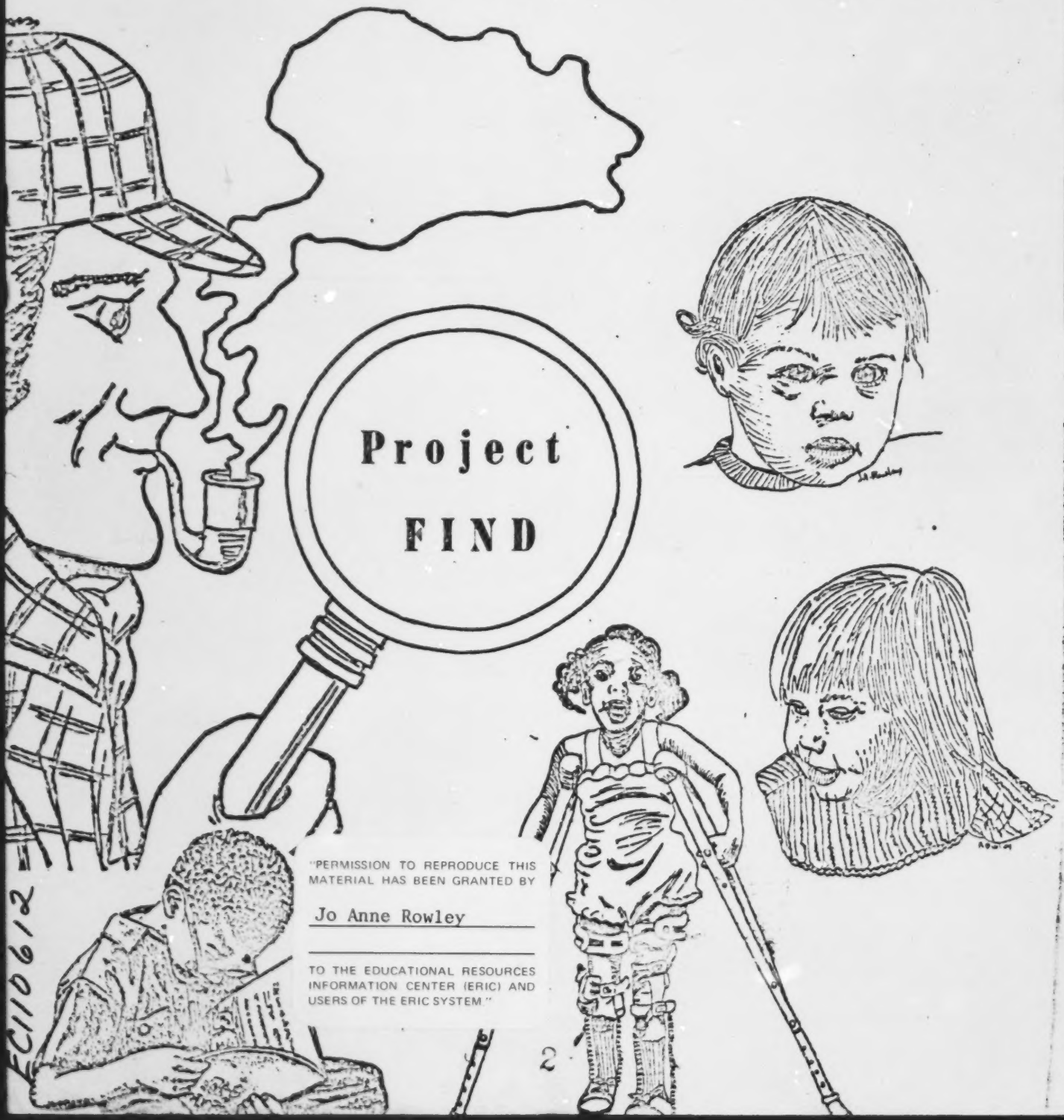
A Zero-Reject System



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A
ZERO-REJECT SYSTEM

Prepared for
THE TEXAS EDUCATION AGENCY

by
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Coordinator
Project FIND*
*Finding Individuals Needing Direction

Gregory-Portland I.S.D.
1978

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PROJECT FIND ZERO-REJECT MODEL

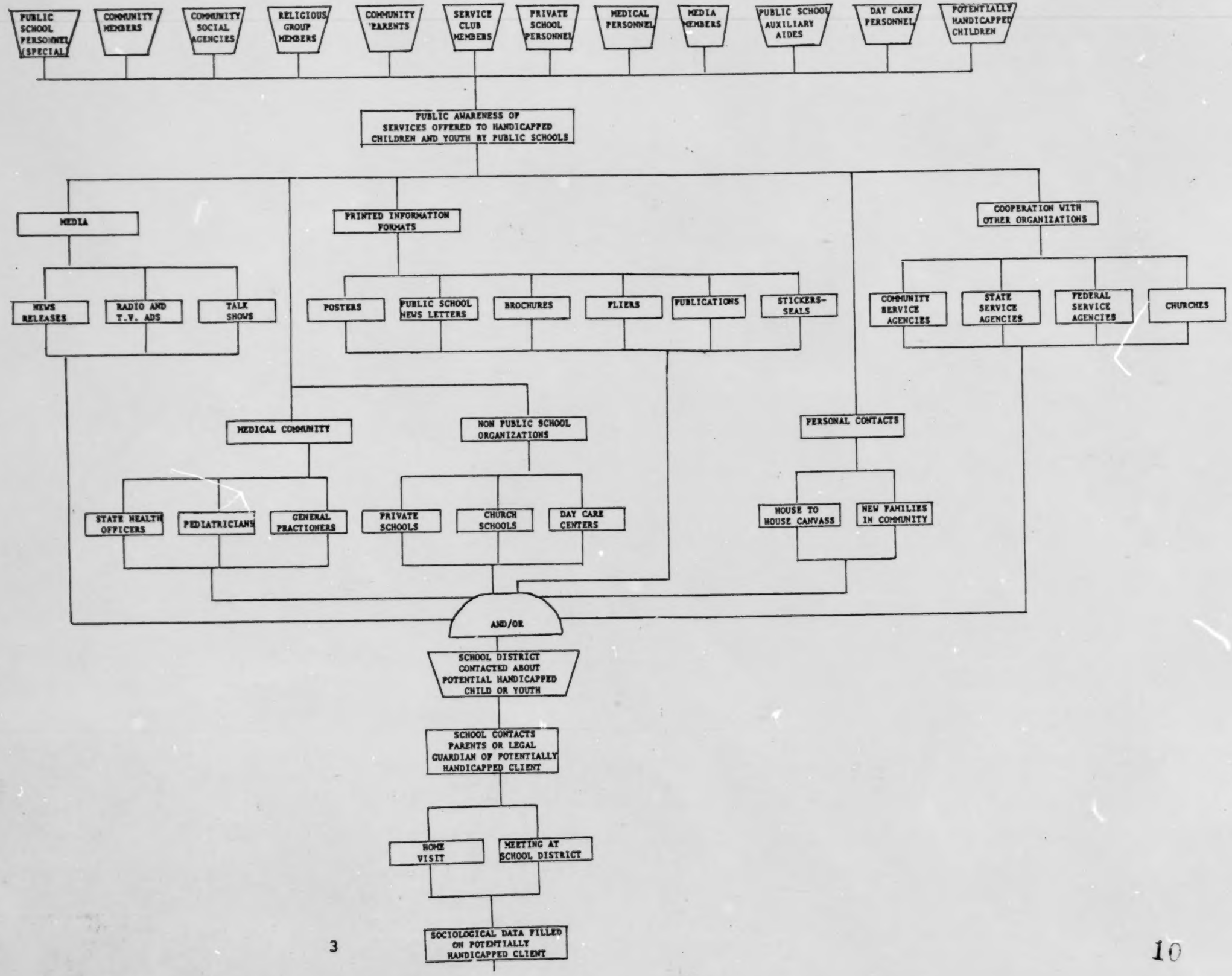
ABSTRACT

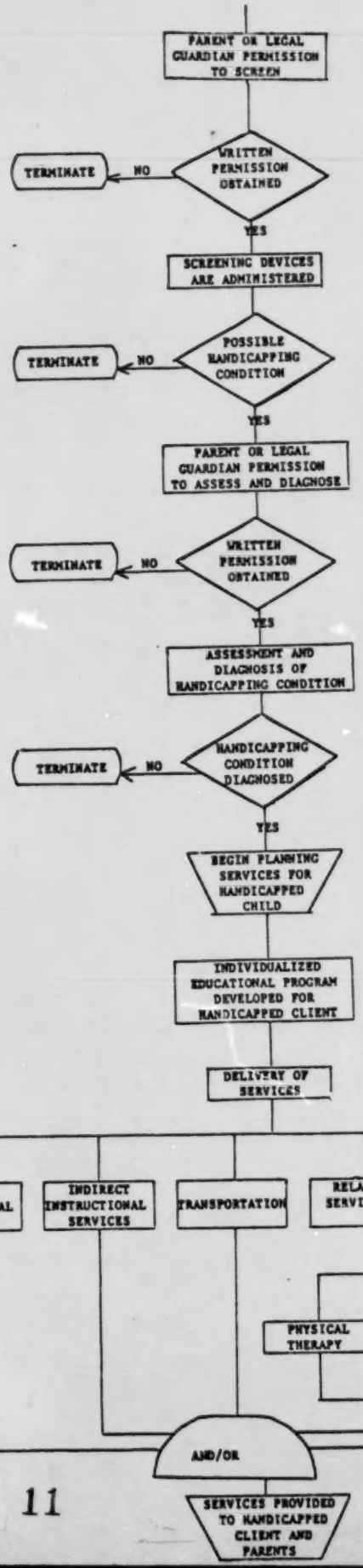
After three years of development, the Project FIND Zero-Reject Model is complete. School districts all over Texas will be perusing this and other documents published by like projects to determine the feasability of using suggestions we make. This system is by no means perfect, but is a very workable model that should adapt to a great variety of situations.

Included in the format of this handbook is information concerning commitment to change and the zero-reject concept, suggested staffing patterns, ideas for staff training, an explanation of the model along with a paradigm, guidance for ways to integrate the system into the existing special education program and recommendations for management.

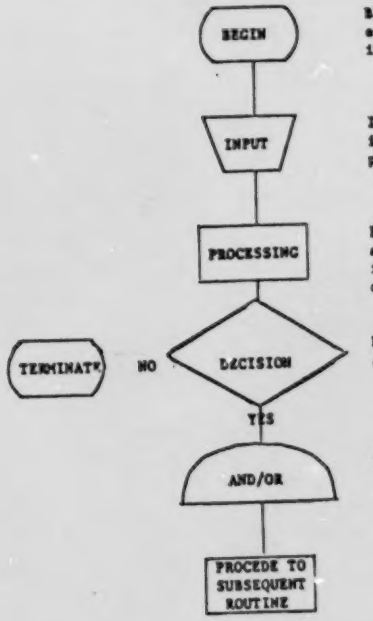
Project FIND was sponsored by the Gregory-Portland Independent School District, a district with a school enrollment of approximately 4,000. The area encompasses 101 square miles on the Corpus Christi and Nueces Bays. There are three elementary schools, one junior high school and one senior high school in the district and population of the two towns is estimated at 14,000.

ZERO-REJECT SYSTEM





INTERPRETATION OF SYMBOLS



BEGIN & TERMINATE--represents an entering or ending stage of information flow.

INPUT/OUTPUT--represents receiving information for processing/represents product of a system or a stage.

PROCESSING--represents a set of activities based upon predetermined instructions for the analyzing input of alternatives.

DECISION--represents the selection of an alternative from an array of alternatives.

AND/OR--represents the junction of two or more components before proceding to a subsequent stage.

It Begins With Commitment

ZERO-REJECT

IT BEGINS WITH COMMITMENT

CHARACTERISTICS:

Any time that change is proposed there will be resistance to it. It seems to relate to the law of momentum that once started in a set direction, it is difficult for people to change directions in any way. Thus a model for zero-reject is a change model and must be based on sound reasoning. This model took three years to develop for that reason. All techniques have been tried, evaluated and rated as to their effectiveness. The system is easy to try because it does not take additional personnel to implement it. Because it dovetails into the existing special education program so well, it is easily understood. (See paradigm) All the above are advantages for using the system and are easily visible.

COMMITMENT:

When you decide to implement this zero-reject system, it is imperative that you plan with key people in your district and get their commitment to change. The superintendent, assistant superintendent, special education support staff, principals and counselors should be involved in the planning stage in order that they see the importance of the change and so they may be well informed on procedures that you will use. These key people will not support change unless they understand the whole process, how it will effect

NEEDS ASSESSMENT:

In planning to move your special education to a zero-reject position it is important to assess your needs. Do you NEED a system to discover handicapped children in your school district? The Public Law 94-142 states that each school district must have a plan for finding handicapped children in effect by 1980. Therefore, if you don't have one, you need one. Are you serving severely-profoundly handicapped children in your district? Why not? Believe me, they are there if you will look for them.

What are your present strengths in looking for these children? You already have a special education program, a director, a diagnostician, probably a counselor and maybe a materials specialist or instructional supervisor. Already you are able to screen handicapped children, test them and serve them. Facilities are already pretty well available for these youngsters.

What are the goals and values of your staff? Are they ready to meet the challenge of seeking and serving the more handicapped child? Do they see that because these children are more needy, education is more important to their future? Do you need training for your staff? Goals must be decided upon and written down. Then look at your staff, materials and building and determine what changes you will need to make. Do you have ramps? What fixtures need to be added? What additional training is necessary? Try to keep communi-

cations open to the free exchange of ideas among your staff. Are time and money available to support the system? If not, what changes need to be made?

Most important, can the staff see the rewards of using the search system? Certainly there will be added responsibilities and changes in teaching procedure, but will it be worth the effort? Can you show your teachers and administrators the benefit to the school and the student? This is a very important step in involving your school in the implementation of this search system. For all should agree on the importance of carrying it out.

Staffing Patterns

ZERO-REJECT

STAFFING PATTERNS

SIMPLICITY:

The search system developed by Project FIND is based on the reasoning that though all public schools must have a search system, there will be no funds available to finance those systems. Therefore all activities must be efficient and effective enough to be accomplished by existing staff. As plans for searching out all handicapped children are formulated, it is easy to see the importance and function of each activity. Simplicity has been the guide-word in developing this system. Because the function is to locate handicapped students, the special education staff is the most feasible to work the system.

Though the activities comprise added duties for the existing special education support staff, none are time consuming or difficult. Planning the activities in the early part of the school year is the most important action that must be done by the staff. All other activities can be adapted from materials included in the system. All suggested activities have been planned so as to mesh with the present program. Support staff are assigned duties that logically fit within their present role descriptions.

DIRECTOR RESPONSIBILITY:

The special education director becomes responsible for

public awareness activities or assigning someone to be accountable for them. With the help of the handbook developed by Project FIND on public awareness, First, You Get Their Attention, (available at your local education service center) this should not be very time consuming at all.

COUNSELOR RESPONSIBILITY:

Because the duties of the counselor include frequent contact with parents, some parent involvement activities are assigned to that person if you choose to include that aspect of related services in your program. Such duties as helping plan parent meetings and giving additional training to parents are assigned to the special education counselor.

Helping design printed information, representing the school district on talk shows and attending community awareness meetings may also be part of the counselor's job description.

INSTRUCTIONAL SUPERVISOR RESPONSIBILITY:

On the shoulders of the special education materials specialist or a special education instructional supervisor rests the responsibility of developing and promoting a parent library and helping with parent meetings. This person also may be utilized in helping design printed information and representing the school district in various respects.

Although it would be nice to have one person hired to implement the search system in each school district across

Texas, the disadvantages in the form of salaries for all those individuals are quite apparent. As the number of handicapped students being found in those school districts increases, other advantages will become visible.

Staff Training

ZERO-REJECT

STAFF TRAINING

WORKING WITH PARENTS:

As our project progressed through the months, it became apparent that the special education support staff may need training in methods to handle parents of handicapped children and in planning parent meetings. Therefore, we produced and published a training module based on our experience. This module, Developing Effective Parent Involvement Techniques, is written in a programmed format and includes components on understanding parent feelings, parent contact techniques including a section on "active listening", evaluation procedures and sample parent meeting formats. You may write the Gregory-Portland School District for a free copy, borrow one from your local Education Service Center or ask the ESC to make you a copy. There is also a planned in-service packet on parent involvement based on the handbook at your regional service center.

PUBLIC AWARENESS:

You may want to investigate the possibility of having the ESC provide staff training on public awareness activities. An in-service training program based on the handbook, First, You Get Their Attention, is available for presentation by either ESC personnel or by your own staff and is on loan at the Education Service Center.

SCREENING:

With the regular classroom teacher becoming responsible for all screening in school districts, we felt the need for a training program on screening techniques. Thus we developed and printed A Programmed Module For The Development Of Competency In Screening Techniques. Tests covered in this module include the: Peabody Picture Vocabulary Test, Slosson Intelligence Test, Slosson Drawing Co-ordination Test, Draw-A-Person and a Motor Developmental Checklist. Copies may be obtained by writing the Gregory-Portland School District, asking the ESC to make you a copy or by borrowing the copy on loan at your local ESC.

FOR TEACHERS:

It may be difficult to realize the feeling of frustration or inadequacy that your teachers will probably have when they are faced with the prospect of a severely handicapped child in their classroom or school. I, myself, wondered what I could teach them. Therefore, in conjunction with the Region II Service Center, the Special Education Department of Corpus Christi State University and the Corpus Christi State School, we developed two graduate courses for our staff that could be used toward certification in training severely and profoundly retarded persons. See p. 21- p. 26 for both course outlines.

CORPUS CHRISTI STATE SCHOOL

SEMINAR ON THE TRAINING AND EDUCATION

OF

PROFOUNDLY AND SEVERELY RETARDED PERSONS

EDUCATIONAL OBJECTIVES

By the end of this course of study, the student will be able to:

1.) Identify 10 major etiological syndromes commonly associated with severe and profound mental retardation.

2.) Recognize major developmental patterns associated with profound and severe retardation (psychomotor, emotional, speech, neurological, behavioral, social).

3.) Accurately interpret major psychometric tools commonly used to diagnose children with severe disorders.

4.) Use and interpret commonly used rating scales (BCP, VCMS).

5.) Demonstrate the use of observational techniques in the classroom.

6.) Interpret and use the social evaluation.

7.) Participate effectively as a member of the interdisciplinary team.

8.) Identify major terms and concepts used in behavior modification.

9.) Apply behavior shaping concepts in a practical classroom setting.

10.) Demonstrate skill in writing and applying behavior shaping techniques to at least three training areas.

11.) Identify and describe major curriculum areas applicable to severely and profoundly retarded individuals.

12.) Identify and use at least 10 types of instructional materials applicable for profoundly and severely retarded persons.

13.) Develop and apply an effective evaluation system for an instructional program.

In the affective domain, the student will become more comfortable in dealing with the problem of profoundly and severely retarded individuals.

CORPUS CHRISTI STATE SCHOOL

SEMINAR ON THE TRAINING AND EDUCATION

OF

PROFOUNDLY AND SEVERELY RETARDED PERSONS

COURSE OVERVIEW

I. Introduction and Definitions:

A. Historical Perspective

B. Concepts - I.Q.: Adaptive Behavior Level

C. Behavioral Description of the Child

II. Etiology:

A. Developmental

1. Speech

2. Neurological

3. Psychomotor

4. Emotional

B. Genetic Disorders - Screening and Counseling

III. Needs Assessment - Severely and Profoundly Retarded:

A. Psychometric Tools (DDS, BIS, CATTELL, other tests)

B. Rating Scales (BCP, VSMS)

C. Observation

1. Techniques of Observation

2. Recording Observation Data

D. Concept of Interdisciplinary Team

E. Educational Assessment

F. Social Evaluation

Course Overview

IV. Program and Curriculum Development:

A. Targeting Areas (self-help, motor, language, cognitive, perceptual, emotional)

B. Shaping Behavior

1. Fundamentals of Behavior Modification

2. Program Writing and Implementation

V. Resources for Program Development:

A. Instructional Materials

B. Sequence of Activities

C. Community Resources - Organization

D. Additional Information

VI. Assessment of Program Effectiveness:

A. Program Monitoring

B. Profile Analysis

VII. Practicum:

CURRICULUM FOR

FIELD EXPERIENCE E.D. 585

Class hours: 4 hours per day for a period of 10 days

I. Objective:

Three (3) hours of training will take place at the dorms in the Corpus Christi State School. The students will implement programs in areas of:

(1) Sensory-motor

(2) Basic academic skills

(3) Attention span

(4) Maladaptive behavior

(5) Self-help skills

And, will receive one (1) hour per day of theoratical training in program writing, implementation and evaluation techniques. Students are allowed to select their own area(s) of interest.

II. Program Writing:

(a) Targeting goals

(b) Components of programs

(c) Resources

(d) Techniques

(e) Data recording and progress notation procedures

Curriculum

III. Implementation:

(a) Schedule, personnel and place

(b) Observation techniques

(c) Analysis of data

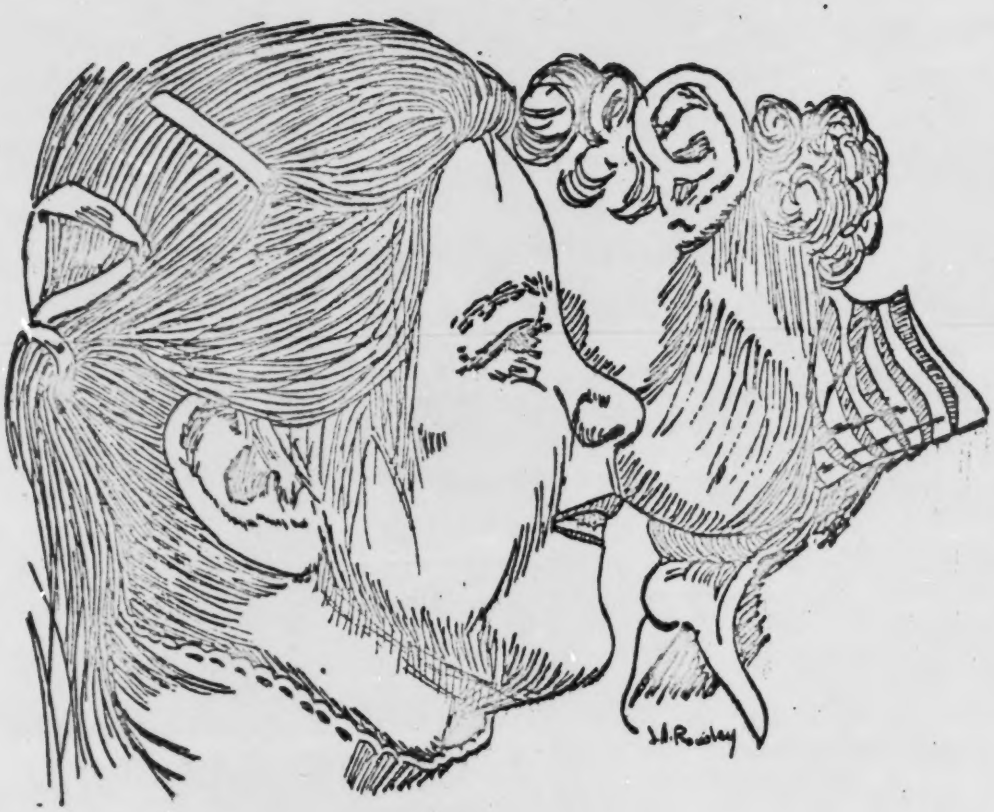
IV. Evaluation:

(a) Formative evaluation

(b) Summative evaluation

(c) Effectiveness

Public Awareness



ZERO-REJECT

PUBLIC AWARENESS

The simple, most reasonable, least costly key to successful zero-reject concept is public awareness. A complete handbook on public awareness procedures entitled, First, You Get Their Attention, was written by the Project FIND coordinator and is available at your Regional Education Service Center.

WHY:

Through the process of trial and error, characteristic of developmental projects, we discovered that the most cost effective and simplest way to seek handicapped children in our community was through a comprehensive public awareness campaign that is not a one shot, hit or miss proposition, but one that is an ongoing activity from now on.

Though Project FIND did not implement an all out house to house canvass, we did canvass two "high risk" apartment complexes and two low-income housing projects as a comparison study. We discovered no unfound handicapped children through the canvass and a vast number of man hours were being expended in this effort. A total of 26 hours were spent surveying the four locales at a cost of $185.36. This does not include the cost of printing door-knockers announcing to the residents of each area that we intended to canvass. Newspaper articles also were written to publicize the activity.

I do not intend to imply that the door to door canvass does not locate unserved handicapped children for other projects have found many of their new clients through this method. (See project materials from AIRS-Alice I.S.D., SEARCH - Giddings Coop. and Project Zero-Reject - Dallas I.S.D.)

Public awareness activities not only locate unserved handicapped youngsters, but also gain the support of the general public and enhance your school district's public image.

WHERE:

Using public awareness activities you can reach the broad area of people who will make referrals. They become input sources, one of the most important elements of this zero-reject system. They include: public school personnel, community members, community social agencies, religious group members, community parents, service club members, private school personnel, medical personnel, media members, public school auxiliary aides, day care personnel and potentially handicapped children.

HOW:

There are various ways to inform the public of the services you offer to handicapped children and youth. They include: media, printed information formats, cooperation with other organizations, the medical community, non-public school organizations and personal contact.

MEDIA:

Radio, newspapers and slide presentations are the three kinds of media we experimented with. On the radio we used taped ads in two languages over four radio stations and I was a guest on a talk show. Both of these activities stimulated interest, but neither generated any referrals. Perhaps a larger community would have better results. Newspaper articles and ads produced a noticable response. 28% of all referrals received during the test period were made as a result of news releases. A slide presentation about Project FIND was produced and shown to teachers and community members. Positive feedback from the presentation was excellent, but no referrals were received as a result. An excellent slide presentation, "Early Warning Signs", developed later during the project discusses some ways to detect special needs children and is available at your Regional Education Service Center. Copies of all media releases are included in the handbook, First, You Get Their Attention.

PRINTED INFORMATION FORMATS:

Printed information went out in reams in the form of posters, newsletters, brochures, fliers, publications and printed stickers. A carefully formulated checklist of possible symptoms went home, through the schools, with each student. Posters were placed in prominent places in local businesses and fliers were available to be picked up by their clientele. A newsletter was published once a quarter and

brochures were sent home with students twice during the developmental program. 15% of all referrals during the test period were made as a result of materials sent home with the students.

The single printed item that helped the public understand the purpose of the project was the brochure. (See appendix.) Included throughout this handbook are drawings from our brochures that you may use to develop one of your own. The price of having brochures printed by a professional public relations firm is extremely costly, $3,155.32 for 10,000 was our cost. However, by producing our own layouts, drawings, script and doing our own printing, this price was significantly reduced to approximately $170.00 for 10,000. (See appendix for brochures.) Copies of all printed information formats are included in the handbook, First, You Get Their Attention.

COOPERATION WITH ORGANIZATIONS:

Service agencies are excellent sources of referrals because state and federal agencies are serving handicapped children through Social Security Supplemental Income, Crippled Children's funds, Welfare or migrant programs. Often there is a duplication of services that is not necessary. We established contact with community service agencies, state service agencies, federal service agencies and churches by implementing a community awareness conference. The purpose of this conference was to keep ourselves and the other service

agencies informed about the services that we each provide thus enhancing the probability that they will be used for maximum benefit. Meeting three times a year for lunch and a sharing program helped us discover services that our students and their families may need. See p. 36 for the procedure to organize a public awareness conference. Other suggestions are made in the handbook, First, You Get Their Attention.

MEDICAL COMMUNITY:

We sent letters to area physicians and clinics explaining the purpose of the project and requesting referrals from them. Brochures were also placed in the physicians' offices after a personal contact with them, but no referrals were recorded as a result of this effort. The best contact with the medical community was with the county health nurse who attended our community awareness programs and cooperated completely in obtaining services for children we found.

NON-PUBLIC SCHOOL ORGANIZATIONS:

There is just one child care facility in the Gregory-Portland community, but mass screening efforts in that school had abundant results. After releases were received from parents, 146 youngsters were screened with five of the children being referred to eye doctors for vision tests and three being referred to the public school. All three children were served through special education when they entered public kindergarten. Referrals from the child care facility were

received periodically.

PERSONAL CONTACTS:

Personal contacts made through house to house canvass during the comparison study netted no unfound children so we initiated another kind of personal contact with new families in the community. The community worker called on each new family briefly and gave them a packet of materials explaining the program. This effort generated good will, but no referrals. An alternate method of contacting this public is recommended if your community is as highly mobile as ours. We developed a brochure that describes all the school programs, and gives some history of the school district. This brochure plus the Project FIND brochure are mailed to new enrollees' families each month. See p. 40 for the plan for new student contact.

ALL OUT ATTACK:

The most interesting fact that appeared during the study of referrals to determine the most effective method of reaching the public was that word-of-mouth was most effective. Evidently people who had not read about the free screening offered in the newspaper or materials sent home with the children were told by their friends and encouraged to bring their child for screening. Many parents who had brought their child for screening reported the non-threatening atmosphere to friends who also brought their children. 43% of referrals received during the test period came be-

cause a friend had told them about the program. So it appears that touching all bases, using the most effective means of contacts results in the community members spreading the information by word-of-mouth.

PROCEDURE TO ORGANIZE

A COMMUNITY AWARENESS CONFERENCE

I. Discover agencies, contact person, addresses and phone numbers by using:

   A. 1,2,3 Handbook (published by M.H.M.R.)

   B. Telephone Book

   C. Local Newspaper

   D. Friends

   E. Chamber of Commerce listings

   F. Education Service Center

II. Agencies to invite include:

   A. Churches

   B. Community Service Agencies

   C. State Service Agencies

   D. Federal Service Agencies

III. One month in advance contact each person and discuss with them the kinds of meetings, purpose, etc. and ask if they would like to attend.

IV. Write a letter and send to each individual who indicated an interest in being present.

V. Set the date, place, someone to cater it, get permission to provide the meal for the first meeting if at all possible. (Alternative is to meet in a cafeteria back room with each paying for their own meal.)

VI. Plan the agenda and get printed, make copies of sample

by-laws and proposed information gathering sheets, get someone for the invocation.

VII. Send out reminders printed on a card to each person about one week in advance.

VIII. If you want table decorations, plan them.

IX. Have someone responsible for taking minutes, getting names on a registry and getting name tags made.

X. Call to be sure caterer or cafeteria is prepared for your meeting. Decorate as needed.

XI. Start serving promptly at 12 noon, begin the formal meeting so as to adjourn at 1:00 promptly. If a cafeteria is the place of the meeting 11:45 is a good time to start in order to miss the 12:00 o'clock rush.

XII. Ask each representative to introduce himself and make a couple of brief statements about the organization he represents.

XIII. Discuss:

A. Do you see that your agency could benefit from belonging to an organization that shares information about services available?

B. Would you be interested in forming and belonging to such a group?

C. Will some of you volunteer to recommend some by-laws at the next meeting? And serve as a nominating committee for officers?

D. How often would you like to meet? Quarterly? Month-

ly? Bi-monthly? Set date of the next meeting and time.

E. Will someone volunteer for the next meeting? Set a price? Pay in advance? Cafeteria style?

F. Would you be interested in sharing with other members the kind of information on this sample page? Revise it?

G. Do you know of anyone else who would be interested in joining an organization of this kind? Talk to them and let us know, or how to call us.

XIV. Program suggestions:

A. United Cerebral Palsy

B. Planned Parenthood

C. County Health Department

D. State Welfare

GREGORY-PORTLAND PUBLIC SCHOOLS

PROJECT FIND

AREA RESOURCE AVAILABILITY FORM

NAME OF AGENCY OR ORGANIZATION, CLINIC ETC. _____

_____

ADDRESS: _____ PHONE NUMBER: _____

TYPE OF SERVICES PROVIDED: _____

_____

_____

IS SERVICE PROVIDED "ON GOING", "FOLLOW UP" ETC. _____ YES OR _____ NO

WHO QUALIFIES FOR SERVICES: _____

_____

_____

TO APPLY, CONTACT: ADDRESS _____ PHONE NO. _____

HOW TO APPLY: _____

_____

_____

INFORMATION THAT MUST BE FURNISHED BY APPLICANT: _____

_____

_____

ANY FEES FOR SERVICES: _____

WHO HEADS THIS ORGANIZATION: _____ OR GROUP: _____

WOULD SPEAKER BE AVAILABLE? _____ IF SO, WHO _____

TELEPHONE NO: _____

		Comments of Services
Transportation		
Financial Help		
Health Care		
Dental		
Clothing		
Employment		
Meals		
Day Care		
Adult Education & Training		
Appliances & Equipment (wheelchairs, crutches, etc)		

PLAN FOR NEW STUDENT CONTACT

I. Why?

A. Abundance of new students

B. Affirmative action in seeking the handicapped

C. Expand knowledge of school services

II. How?

A. Mail out containing brochure on the school district

B. Brochure about Special Education

III. Who?

A. To parents of new students

B. By the Special Education Instructional Supervisor

IV. Approval by:

A. Special Education Staff

B. Assistant Superintendent

C. Superintendent

D. Principals

E. Secretaries

F. Special Education Teachers

Integration

ZERO-REJECT

INTEGRATION

REFERRALS:

When the school receives a referral, the search system is plugged into the existing special education plan and the child or youth is processed through existing routine. The Project FIND developed a card system for our district that has been useful in tracking special education students.

INITIATING CONTACTS:

Often referrals were made by a person outside of the family and it was necessary for staff workers to initiate the contact with the family. A procedure to help personnel on this occasion was implemented and is provided on p. 52.

RELATED SERVICES:

Services already available in the school district were not a part of the developmental project, but some related services that were not provided before were needed. Such services as physical therapy, occupational therapy, and visually handicapped supplemental services were not conceivable for our small district but sources were found and parent training was initiated by the project staff.

PHYSICAL THERAPY:

At some time or another you will find a youngster who needs physical therapy and/or occupational therapy. Most school districts do not have these services readily available

but they can be obtained through most Education Service Centers in Texas. Physical therapy includes stimulation activities that make the child aware of all parts of his body and his surroundings. These will include tactile, auditory, visual, gustitory and olfactory sensory stimulation. The purpose of the range of motion exercises is to keep the parts of the body moving in a normal manner. They make the child feel better, make the blood circulate better, stretch tight muscles and help those muscles relax. With a plan developed by and consultation provided by the physical therapist, a teacher and/or school nurse can do these exercises with the child as part of his curriculum.

OCCUPATIONAL THERAPY:

Occupational therapy helps the child in many ways. Beginning speech for instance, starts with sucking and eating. If the student does not eat well, chew, swallow and use his tongue correctly, speech will not develop properly. The occupational therapist can develop techniques for each child to use in order to utilize his speech mechanisms better.

Protective exercises, finger dexterity, mechanical aides manipulation come under the function of occupational therapy. The child learns to use his body to its maximum ability to all areas. The first step toward getting therapy services for a child is getting a statement of recommendation from the child's physician. Then written parent permission for physical and/or occupational therapy must be secured.

The Admission, Review and Dismissal committee, preferably with one or both parents a member, then decides if therapy is an educational need. When this decision has been made, the child can be referred to the Education Service Center, special education.

After referral, the physical therapist and/or occupational therapist make arrangements with the child's teacher through the Special Education director and the building principal to go into the classroom to evaluate him. At this time, they may also evaluate the classroom as to what specific needs are necessary to work with the child. The physical therapist and occupational therapist will design an individual program for the child and act as consultants in carrying it out with the teacher and/or school nurse.

VISUALLY HANDICAPPED SUPPLEMENTAL SERVICE:

Supplemental services to the blind or visually handicapped are available through the Region II Education Service Center and may be in your region also. Check with the Special Education Department to find out. The services include consultation to special education teachers, regular teachers, staff, counselors and parents in working with the visually handicapped student. Occupational therapy, physical therapy, educational programming, orientation and mobility training are also among the services offered.

Orientation and mobility training will enable the visually handicapped student independence in travel. Learning to

know his location in the environment and locations of desired objectives is part of orientation. Early training begins with body parts, spacial concepts such as between and beside, understanding the environment such as sidewalks, streets, blocks, corners, intersections, traffic control and compass directions. Mobility training then teaches the student how to use the orientation knowledge through such means as the cane, low vision aides, a sighted guide and protective techniques. The learning environment progresses from a quiet classroom setting through the neighborhood to the actual business or desired background.

The pupil will learn how to cross streets at both lighted and non-lighted intersections, to move in crowded areas, to interact with the public, to use public transportation, elevators, escalators, to cross railroad tracks, etc. In short, he will learn to get to and from his job, go shopping or walk to school. All this is necessary in developing independence for the visually handicapped.

The Admission, Review and Dismissed committee must agree that the student needs this training before referral can be made. To refer a visually handicapped child for these services, the following forms must be obtained from the ESC, completed and returned to the Pupil Appraisal-Special Education department.

1. Case History
2. Information Release Consent

3. Parent Permission for Services

4. Parent Permission for Pictures

5. Referral Intake

6. Student Services Request

PARENT INVOLVEMENT:

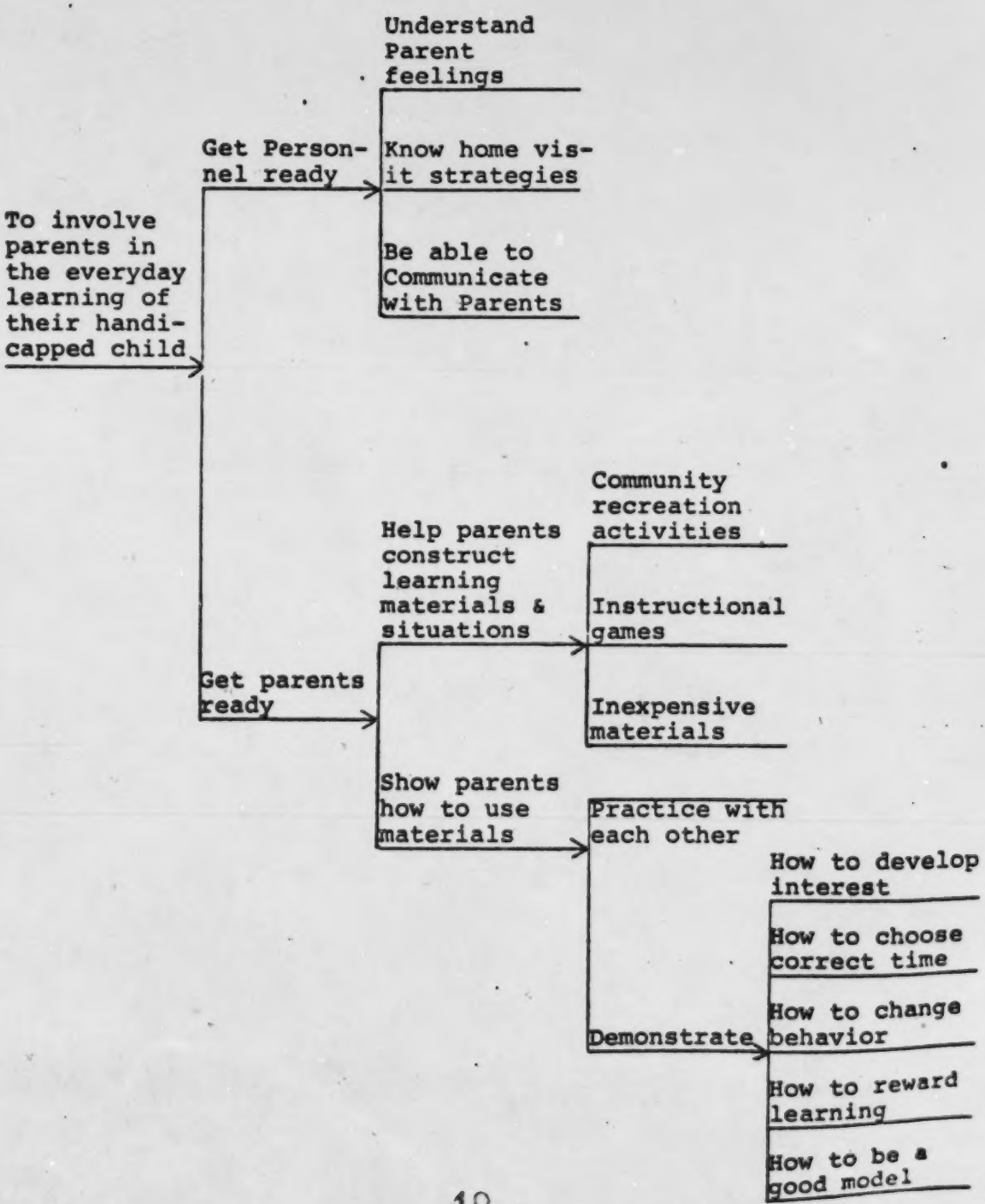
One of the least tapped sources of education for handicapped children is the involvement of parents in furthering the development of their child's potential. Lack of communication between educators and parents is at least partially responsible for this void. As educators become more aware of feelings and frustrations harbored by parents of the handicapped, this gap should begin to narrow and the learning experience expand.

The world at school is a narrow, limited one compared to the world of the home and community. You must realize that parents exert great influence over their children through their feelings and expressions about school, learning, competition, success, failure, responsibility and self-discipline. Parents can discover the joy of learning by recognizing and utilizing teaching opportunities as they present themselves daily.

PARENTS AS TEACHERS:

By having parent meetings for the purpose of enlisting parent's active participation in the learning act, parents can become more knowledgeable about their child, his teacher, the school and education as a whole. True, many parents are

TASK ANALYSIS OF PARENT INVOLVEMENT


To involve parents in the everyday learning of their handicapped child
Get Personnel ready
Understand Parent feelings
Know home visit strategies
Be able to Communicate with Parents
Get parents ready
Help parents construct learning materials & situations
Community recreation activities
Instructional games
Inexpensive materials
Show parents how to use materials
Practice with each other
Demonstrate
How to develop interest
How to choose correct time
How to change behavior
How to reward learning
How to be a good model

actively involved in their handicapped child's education by referring him, getting the necessary papers filled out, endorsed and returned, meeting with the counselor, bringing him in for testing, attending the Admission, Review, Dismissal-Individual Educational Plans meetings and all the other things which must be done in order to get the child enrolled in a special class. This parent involvement program does not cover those things, but addresses itself to showing parents ways to help their children at home and in their community. It also involves the special education counselor in special, individual training of parents, when this is deemed necessary.

COOPERATION:

Parents are willing to attend meetings when they can see immediate benefits for their child. Therefore, many of our meetings involved make-N-take type activities. Both parents enjoy working with their hands to produce something they can take home to use with their child. We used activities that utilized inexpensive materials that can be easily procured by most families. We often had hand-outs for them to take home and read.

ADVERTISING:

Though we tried methods of advertising such as writing articles for the local newspaper, buying ads in the local paper, and putting up posters, we found that a little note sent home with the student is the most effective means of contacting parents. We tried limiting the meetings to parents

interested in handicapped children and opening it up for all parents. Sometimes attendance was very small, sometimes relatively large. It is felt that only personal contact to get individual commitment will motivate parents of the handicapped to attend consistently.

In moving the parent involvement into the existing special education, we found much interest by the staff. The special education consultant and counselor in particular were utilized, but the home/school liaison proved to have more contacts in the community and was able to get a volunteer to help with the initial planning.

A handbook, Developing Effective Parent Involvement Techniques, was published by the Project FIND staff and is available through your Regional Education Service Center, or you may write the Gregory-Portland I.S.D., Box 338, Gregory, Texas 78359 for a copy.

TRANSPORTATION:

After the Admission, Review and Dismissal committee has determined a child needs special transportation, it can be provided only if the parent will sign an agreement making four stipulations.

1. A responsible person is to be at the desired address at the time of departure and return of the child.
2. The child is to be ready for school at the designated time and will be accompanied to the vehicle. School transportation personnel may not enter the designated

address.

3. The parent is to authorize medical treatment for the child at an approved medical facility in case of extreme emergency.

4. The school district will abide by the guidelines set forth above for the child's protection.

A copy of our transportation agreement is provided on p. 55.

HOME VISIT PROCEDURE

A. Identify yourself:

   1. I am John Doe and I work for _____I.S.D.

B. State the purpose of your visit.

   1. A citizen in the community referred you as having a possible handicapped child.

   2. Show an interest in the child.

      a. Hold him.

      b. Talk to him.

      c. Don't frighten him.

C. Outline briefly the services provided by the school district.

   1. Vision, Hearing, Psychological screening

   2. Psychological testing

   3. Appropriate school services

      a. Early Childhood class

      b. Multi-Handicapped class

      c. Trainable Mentally Retarded class

      d. Resource classes

D. When Making a Visit:

   1. Dress neatly

   2. Speak clearly

   3. Be knowledgeable

   4. Be informal, but not too casual

E. Be friendly and complimentary with the family.

F. Be patient, listen and ask your questions so as not to offend anyone.

G. Do not take sides, instead refer critical questions to your supervisor.

H. Do not try to give advice or recommendations if you are uncertain concerning the facts. Write down their questions and tell them you will attempt to obtain an answer and that either you or your supervisor will contact them.

I. If there is a handicapped child, make a date to return to fill out the sociological data form. End with a positive note. Thank the family and depart.

SUBSEQUENT VISIT PROCEDURE

A. Review your perception of the situation so you can communicate what is going on, how much, how often, where, when and who is involved. Explain efforts and progress to date.

B. Always greet parents as equals, you are not really the expert.

C. Emphasize the importance of the parents' involvement and sharing.

D. Try to discover the parents' perception of the child and elicit their insight.

E. Try to understand the parents' goals for their child and together begin to formulate a plan.

F. Explain the plan in relation to the child's total educational programming.

G. Involve them in the development and implementation of all planning for their child.

H. Plan for further meetings when necessary.

SPECIAL EDUCATION TRANSPORTATION AGREEMENT

The Admission, Review and Dismissal Committee (ARD) has determined that my child is eligible to receive special education transportation. I hereby request that my child receive this service provided by Gregory-Portland ISD. I understand that:

(1) A responsible person is at the designated address at the time of departure and return of the child.

(2) The child will be ready for school at the designated time and accompanied to the vehicle. School transportation personnel may not enter the designated address.

(3) I authorize my child to receive medical treatment at approved medical facility in case of extreme emergency.

(4) The school district must abide by the guidelines set forth above for the protection of my child.

Signature of Father	Address (Home)	Phone (Home)
	Address (Business)	Phone (Business)
Signature of Mother	Address (Home)	Phone (Home)
	Address (Business)	Phone (Business)

_____

Transportation address if different from above (with ARD approval only)

_____

Signature of responsible person at above address

EMERGENCY INFORMATION:

These following relatives or friends may be notified.

(1) _____ _____ _____
Name Address Phone

(2) _____ _____ _____
Name Address Phone

Management

ZERO-REJECT

MANAGEMENT

PUBLIC AWARENESS MANAGEMENT FORM:

Planning and management of public awareness activities can be slipshod and poor; well planned-but not carried out or well planned and managed well. In the latter case, the activities will happen almost automatically. All personnel having responsibility for public awareness activities must help plan the year's work. Responsibility for each activity should be assigned when the plans are made. I highly recommend the use of our manual on public awareness, First, You Get Their Attention, as an aid to you. The manual shows the step by step process for developing your public image and suggests numerous activities that have been tried and proven.

The Public Awareness Management form on the following page is a way to provide direction for your staff. As plans are made, the form is filled out and copies made for each person responsible for activities. The time factor will serve as a reminder to them and allows sufficient time for each person to develop their activity.

PUBLIC AWARENESS MANAGEMENT FORM

Audience	Channel	When	Objective	Cost	Person Responsible
Planning		August 17	Plan activities for year.		Director, Counselor Supervisor
General Public	Newspaper Article	July 12 August 15	To publicize the special classes for severely handicapped children.	Public Service	Special Education Director
Parents	Letter through schools	Sept. 7	To inform about possible learning problems in 3-4-5 year olds.	Printing	Special Education Counselor
New Families	Information packet mailed to all newly enrolled students' families	Throughout year beginning September.	To inform new people in town about services available through the school.	Printing Costs	
General Public	Radio spots KZBA, KAFT, etc.	Sept. 14	To encourage the listening public to take advantage of special services.	Public Service	Special Education Instructional Supervisor
Minority	Minority language radio spots		To inform those whose home language is not English about services.	Public Service	Special Education Instructional Supervisor
Teachers	Local newsletter	Oct. 15	To inform about classes for severely handicapped.	Printing	Supervisor, Director, Counselor
Parents	Check service through schools	Oct. 30	To show how easily services can be obtained for handicapped.	Printing	Supervisor
P. T. O.	Speech	Nov. 6	Describe the process of evaluation.		Director

HOME AND PARENTAL CONTACT RECORD:

As contacts with the parent and home are being made more and more often for handicapped students, the necessity for a method of documentation became apparent. This form, developed by the Gregory-Portland Special Education Support Staff, will help you know who contacted whom, when and what was said or accomplished. Each classroom teacher and each person on the support staff logs calls, dates, casual meetings, etc. with parents that pertain to the child's education. At the end of the year, all records are placed in the youngster's file for future reference. Other opportunities for parent contacts are: six weeks narrative reports, ARD and IEP meetings.

INDIVIDUAL EDUCATION PROGRAM:

The federal law requires that an individual educational plan be made for each handicapped child. This plan is a joint plan and includes the team of educators who are responsible for the various elements of the child's education. Regular education is responsible for the Total Service Plan. Special education personnel trained in teaching children with learning disabilities or other handicapping conditions are instrumental in developing the I.E.P., Individual Education Plan. The IIP is the implementation of this total plan which included his entire education.

The following forms were based on the models developed by the National Association of Special Education Directors. These were used in Gregory-Portland beginning with the 1977-78 school year.

GREGORY-PORTLAND PUBLIC SCHOOLS

DEPARTMENT OF SPECIAL EDUCATION

HOME AND PARENTAL INVOLVEMENT RECORD

STUDENT_____ SEX___ BIRTHDATE_____ GRADE___

SCHOOL_____ REG. TEACHER_____ RES. TEACHER_____

PARENTS_____ ADDRESS_____ PHONE_____

ETHNIC_____ PARENT'S DESIGNATION OF DOMINANT LANGUAGE OF:

(1) Parent/Home_____ (2) Child_____

AT LEAST ONE HOMEVISIT OR PARENT CONFERENCE IS REQUIRED BY END OF 2nd QUARTER.

CONTACT: SUMMARY OF CONTACT:

Date	Initiator	Person Contacted	Nature, Method, Place	State specific topic of discussion and outcome. Information which may be pertinent to the educational environment should be included.

CONTACT: SUMMARY OF CONTACT:

Date	Initiator	Person Contacted	Nature, Method, Place	State specific topic of discussion and outcome. Information which may be pertinent to the educational environment should be included.

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GREGORY-PORTLAND PUBLIC SCHOOLS

DEPARTMENT OF SPECIAL EDUCATION

INDIVIDUAL EDUCATION PROGRAM: TOTAL SERVICE PLAN

NAME:_____

BIRTHDATE:_____C.A.__

School_____Grade__

Resource Teacher:
_____

Classroom Teacher:
_____

Educational Diagnostician:
_____

Date of Educational Plan:
_____

Summary of Present Levels of Performance measured by:
_____

Mathematics
Reading Recognition
Reading Comprehension
Spelling

Relative Strengths	Relative Weaknesses	Prioritized Long-term Goals

Short-term Objectives	Educational and/or Related Services	Person Responsible	Beginning and Ending Date	Review Date

Short-term Objectives	Educational and/or Related Services	Person Responsible	Beginning and Ending Date	Review Date

GREGORY-PORTLAND PUBLIC SCHOOLS

DEPARTMENT OF SPECIAL EDUCATION

INDIVIDUAL EDUCATION PROGRAM: INDIVIDUAL IMPLEMENTATION PLAN

(complete one of these for goal statement specified on Total Service Plan)

STUDENT'S NAME_____ CONTENT AREA:_____

SCHOOL_____ GOAL STATEMENT:_____

DATE OF PROGRAM ENTRY_____ _____

PROJECTED ENDING DATE_____ SHORT TERM INSTRUCTIONAL OBJEC-

PERSON (s) COMPLETING FORM: TIVE:_____

_____ _____

Behavioral Objectives	Task Analysis of Objectives	Strategies and/or Techniques	Materials and/or Resources	Date Starts	Date Ends	EVALUATION

GREGORY-PORTLAND PUBLIC SCHOOLS

DEPARTMENT OF SPECIAL EDUCATION

INDIVIDUAL EDUCATION PROGRAM - RE-EVALUATION

DATES:													
	Entry Behavior			Second Evaluation			Third Evaluation			End of Year Evaluation			
TASK-OBJECTIVE	+	NA	-	+	NA	-	+	NA	-	+	NA	-	COMMENTS

TASK OBJECTIVE SCORING SYSTEM:

+ Indicates objectives performed satisfactorily

NA Indicates further assessment needed or objectives not evaluated

- Indicates that objective needs to be taught

INSTRUCTIONAL SUPERVISOR:

_____

Behavioral Objectives	Task Analysis of Objectives	Strategies and/or Techniques	Materials and/or Resources	Date Starts	Date Ends	EVALUATION

GREGORY-PORTLAND PUBLIC SCHOOLS

DEPARTMENT OF SPECIAL EDUCATION

INDIVIDUAL EDUCATION PROGRAM - RE-EVALUATION

DATES:													
	Entry Behavior			Second Evaluation			Third Evaluation			End of Year Evaluation			
TASK-OBJECTIVE	+	NA	-	+	NA	-	+	NA	-	+	NA	-	COMMENTS

TASK OBJECTIVE SCORING SYSTEM:

+ Indicates objectives performed satisfactorily

NA Indicates further assessment needed or objectives not evaluated

- Indicates that objective needs to be taught

INSTRUCTIONAL SUPERVISOR:

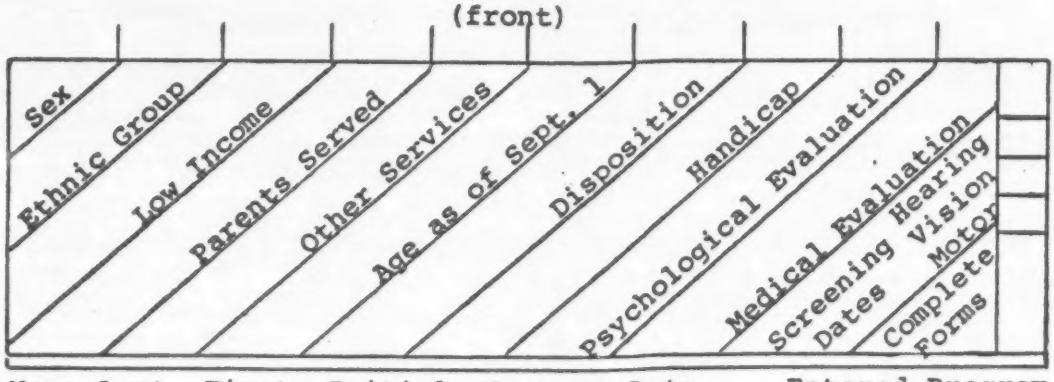
_____

CARD FILE:

One of the questions most often asked after handicapped students are found is, "Are they still being served"? Others include, "Where are they being served? What services are they receiving? How are they being served?". This kind of information is periodically needed for reporting to state agencies and must be gathered from a multitude of sources for this purpose. A color coded card tracking system was devised by the project to facilitate answering the questions we needed answered.

Below is a reproduction of the card and the procedure for its use is on the following pages.

(front)



Name:Last First Initial Contact Date Entered Program

Address:Street City State Zip DOB Mo. Day Year

Parents or Guardians: Phones: Home Business

Occupation: How did you hear about Project FIND?

Reason for referral:

(back)

Physician: Phone:

Address:

Significant Physical Findings and/or Restrictions:

Significant Neurological Findings:

Medication Recommended:

Other schools attended:

Other children in home:	Name:	Age:	Sex:
Notes:			

Card File Procedure

A. On First Contact (even if by phone):

Fill out left side of front of card.

1. Name: Last, First, Initial
2. Address:
   a. Home address (number and street)
   b. City, State, Zip Code
   c. P. O. Box (if applicable)
3. Date of Birth (month, day, year).
4. Name of parents or guardians.
5. Phones: Home and Business.
6. Occupation (of one or both parents).
7. Date of Initial Contact.
8. Reason for referral (why informing party contacted the project).
9. How did you find out about Project FIND? (word of mouth, newspaper, radio, etc.)

B. Upon Receiving Pertinent Medical Information.

Complete reverse side of card.

1. Physician's name and phone.
2. Physician's address.
3. Significant Physical Findings--any physical condition which must be taken into consideration in the child's educational process.
4. Significant Neurological Findings.
5. Physical restrictions--activities the child cannot participate in which the the teacher should be aware of.
6. Medication Recommended.

7. Other Schools Attended.

8. Number of children in home (lines for names, ages and sex).

C. As Information is Acquired:

Fill out right front side of card.

1. Disposition ("D" on card); the code number of the public or non-public school program in which the child was placed.

Public School Codes:

001 Gregory-Portland High School

101 Austin Elementary School

102 Clark Elementary School

103 East Cliff Elementary School

141 Junior High School

200 Private School

Non-public schools (Therapeutic)

a. Ada Wilson

b. Corpus Christi State School

c. Sheltered Workshop

2. Handicap; Identified Handicapping Condition

TMR——Trainable Mentally Retarded

EMR——Educable Mentally Retarded

LLD——Learning Disabled

ED——Emotionally Disturbed

OHI——Other Health Impaired

RH——Crippled Physically Handicapped

VH------Visually Handicapped

DB------Deaf-Blind

AH------Deaf-Auditorilly Handicapped

or

AH------Hard of Hearing

SP------Speech Impaired

3. Psychological Evaluation Date written in box

4. Releases Complete-Write date in box

Releases include:

a. Permission for screening

b. Permission for Psychological testing

c. Parental release of information

d. Parental approval for special services

5. Medical Date and Special Medical Dates written in box.

6. Screening Date written in extreme right upper corner box is then color-coded.

a. Color coding:

(1). Green = No obvious problem.

(2). Yellow = Caution, possible problem.

(Note: In the event that after further evaluation no problem is apparent, the box should be colored over in green.

If further evaluation reveals a handicap, the box should be colored over in red...

(3). Red = If screening reveals a definite handicap, the box should be coded in red.

b. Developmental Areas Screened.

(Each area will be color-coded as above)

(1). Vision

(2). Hearing

(3). Motor

7. Psychological Requested - date entered in box.

8. Screening Committee Date entered in box.

9. Forms Complete - date entered in box.

Forms include:

a. General Medical Evaluation

b. Sociological Data

c. Application for Early Childhood (if applicable)

d. Exceptional Children's Transportation (if applicable)

e. Personal Referral Form

10. Other Services.

Include:

SSI——Supplemental Social Security Income

CCF——Crippled Children's Funds

O——Other (See Personal Referral Form)

11. Parents Served - check box

12. Low Income - check box

13. Sex ("S") M or F in box

14. Ethnic Background ("E")

Code accordingly:

1. Indian

2. Black

3. Oriental

4. Hispanic

5. Other

15. Child Find Identification Number

Blank located at the top center of front of card and indicated by "#". This number is obtained from the Regional Education Service Center.

D. Sections:

1. Active:

Children who have been referred but not yet screened.

2. Placed:

Children who have been enrolled in either a public or private program.

3. High Risks:

a. Children who have been referred and screened, who have not enough to merit placing them in a special program at this time.

b. Younger siblings of handicapped children already in the program.

c. Young children who have been screened who need re-screening at a later date.

4. Psychologicals:

Children whose screening indicated further evaluations are necessary. These cards stay here until the child is placed in a program because of a handicap or returned to

High Risks because the problem is not severe enough.

5. Drop-Outs:

   a. Students who were enrolled in the Gregory-Portland Special Service classes and left school under 22.

   b. Students who left school under 22.

6. Hold:

   Students who are High Risk who have moved away.

7. Screening "1976-1977":

   Children who were screened by the project during the year and found to have no problem.

E. Follow-Up Tabs:

1. Color coded tabs are placed on cards in the placed section in the following manner:

   a. Red——————————daily

   b. Orange——————————weekly

   c. Yellow——————————bi-weekly

   d. White——————————monthly

   e. Dark Blue——————————quarterly

2. Color coded tabs are placed on cards in the High Risks section in the following manner:

   a. Green——————————rescreen in April or re-contact in April.

   b. Dark Blue——————————quarterly.

3. Color coded tabs are placed on cards in the Drop-Out section in the following manner:

   a. Light Blue——————————who would like service.

F. Child Find Identification number:

Blank located at the top center of front of card and indicated by "#". This number is obtained from the Regional Education Service Center.

GET ON WITH IT:

I hope that this handbook and all of the others developed by Project FIND are useful to you in your effort to locate and serve handicapped children. The task is a never ending one because handicapped children continue to be born and normal children continue to become handicapped through disease and injury. I believe your efforts in public relations will reap the greatest rewards in assuring parents that your school has the expertise to educate all handicapped children. Your service to them will prove the truth of your claims.

Now, get on with it! "Plan your work, and work your plan." Your Education Service Center should be a great source of information in this effort. Also, I hope to be available on a limited basis for consultation in making zero-reject plans. Contact me, if necessary. Maybe I can help.

Jo Anne Rowley

Special Education
Box 338
Gregory, Texas 78359
643-6566

2190
88-2335
1479

1977 1978

PAY TO THE ORDER OF Handicapped Children 3-21 $XX.XX

Special Education DOLLARS

GREGORY-PORTLAND SCHOOLS

MEMO Services W. C. Supt.

⑈11409⑈ ⑆3065 ⑆4126 1⑈

GREGORY-PORTLAND

INDEPENDENT SCHOOL DISTRICT

BOX 338

GREGORY, TEXAS 78359

PHONE 643-6566